

Criteria of Death (Withholding Resuscitation)

Protocol

Douglas County KS EMS System

March 2021

Referenced Procedures: None

Goals for Patient Care

- All clinically dead patients will receive all available and applicable resuscitative efforts unless contraindicated by one of the exceptions defined below.
- This is for individual patients and does not apply to mass casualty events

Patient Presentation

- A clinically dead patient is defined as any unresponsive patient found without effective respirations and without a palpable pulse.

Withholding Resuscitation

Resuscitation should be initiated on all patients who are found apneic (or with agonal breathing) and pulseless unless the following conditions exist:

- Medical condition, traumatic injury, or body condition clearly indicating death, limited to:
 - Decapitation, Decomposition or putrefaction, Transection of the torso
 - Severe burn/incineration: 90% of body surface area with full thickness burns
 - Injuries incompatible with life (For example, massive crush injury, complete exsanguination, severe displacement of brain matter, etc.)
 - Non-traumatic arrest with obvious signs of death
 - For example, dependent lividity or rigor mortis
 - A valid DNR (Do Not Resuscitate) order or other actionable medical order (e.g., TPOPP) is present
- No CPR is required if any of these above exceptions exist
- If CPR has been initiated but an above exception has been subsequently confirmed, CPR may be discontinued without Direct Medical Oversight
- If any of the findings are different than those described above, clinical death is not confirmed and resuscitative measures should be immediately initiated or continued.

Do Not Resuscitate Orders

- If there is a valid out-of-hospital DNR form and there are signs of life, provide appropriate treatment under existing protocols matching the patient's condition.
 - ☎ To request permission to withhold treatment, call medical control.
- If there is documentation of a Do Not Intubate (DNI), TPOPP, or other advanced directive, the patient should receive full treatment per protocols with the exception of any intervention specifically prohibited in the patient's advanced directive.
 - ☎ **In cases where the patient's status is unclear and the appropriateness of withholding resuscitation efforts is questioned, EMS personnel should initiate CPR immediately and then contact hospital for direct medical oversight.**

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Key Considerations

- At a likely crime scene, disturb as little potential evidence as possible.
- Photocopies, faxes and electronic media formats of advanced directives will be honored.
- Advanced Directives should be documented and filed with EMS report when available.